

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

Serial No.
Applicant(s)

Filing Date

70/565,813

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51						
2		/					52						
3		/					53						
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47							97						
48							98						
49							99						
50							100						
TOTAL IND.	2	↓		↓		↓							
TOTAL DEP.	10	←		←		←		↓		↓		↓	
TOTAL CLADS	12	████████	████████	████████	████████	████████	████████	████████	████████	████████	████████	████████	████████